NAME OF COMMITTEE (In Full)

NRCC

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE 79	83 OF 7997
		24 OF FORM 3X
FEC	IDENTIFICAT	TION NUMBER ▼
С	C0007582	0
- M	/ D D /	YYYY
of Pub	lic Distributio	n/Dissemination
09 ^M	25	/ Y Y Y Y Y 2018
ınt		
	, , ,	24921.99
	ID: SE24-0. oursement or	
M 09	26	2018
ht:	X House	District: 02
ent	Senate	State: VA
nt For:	Prima	ry X General
Other (s	specify)	
of Pub	lic Distributio	n/Dissemination
09 ^M	12	2018
ınt		
		12000.00
	n ID : SE24-0 oursement or	
09	12	2018
ht:	X House	District: 02
ent	Senate	State: VA
	Prima	ry X General
nt For:	specify)	
Other (s		
Other (s		36921.99
Other (s		36921.99
Other (s		36921.99
7		36921.99

				C 600073820			
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report							
Full Name of Payee ONMESSAGE INC	Date of Public Distribution/Dissemination						
Mailing Address 705 MELVIN DR	09 25 2018						
STE 105	Amount						
City State		Zip Code		24921.99 Transaction ID : SE24-0.081068			
ANNAPOLIS MD		21401		Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA		Category/ Type					
Name of Federal Candidate:		Support	Office	e Sought: House District: 02			
LURIA, ELAINE, , ,	x Oppose		President Senate State: VA				
Calendar Year-To-Date Per Election for Office Sought	, ,	742396.78	Disbu 2018	ursement For: Primary X General Other (specify) ▶			
Full Name of Payee	Item	Date of Public Distribution/Dissemination					
ONMESSAGE INC		09 / D D / Y Y Y Y Y Y 12 2018					
Mailing Address 705 MELVIN DR STE 105	Amount						
City	State	Zip Code		12000.00			
ANNAPOLIS	NNAPOLIS MD			Transaction ID : SE24-0.080072 Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA		Category/ Type		09 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate:	Support	Office	e Sought: X House District: 02				
LURIA, ELAINE, , ,		x Oppose		President Senate State: VA			
Calendar Year-To-Date Per Election for Office Sought	, , ,	742396.78	Disbu 2018	orsement For:			
(a) SUBTOTAL of Itemized Independent Expenditures							
(b) SUBTOTAL of Unitemized Independent Expenditures							
(c) TOTAL Independent Expenditures							
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.							
Davis, Keith, A, ,	[Electronically Fi	led]	M	0 08 2018			
Signature		Date	9 1	0 00 2010			
FEC Schedule E (Form 3X) Rev. 05/2016							